

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF PAUL GREGORY HOUSE	COURT CASE NUMBER 3:96-cv-883
DEFENDANT RICKY BELL, Warden	TYPE OF PROCESS Writ

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Warden, Lois M. DeBerry Special Needs Facility
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 7575 Cockrill Bend Blvd., Nashville, TN 37243-0469

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> FILED 2008 JUN 11 PM 1:29 U.S. MARSHAL E/IN KNOXVILLE, TN 2008 MAY 13 PM 2:53 RECEIVED </div>
Clerk, U.S. District Court 800 Market Street, Suite 130 Knoxville, TN 37902		Number of parties to be served in this case 1	
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

Signature of Attorney or other Originator requesting service on behalf of: <i>Angela Brush, Deputy Clerk</i>	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (865)545-4228	DATE 5/13/08
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 74	District to Serve No. 75	Signature of Authorized USMS Deputy or Clerk SM	Date 5/13/2008
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. Date of Service 5/20/2008 Time am pm Signature of U.S. Marshal or Deputy SM
Address (complete only if different than shown above) Entered 5/13/2008 Transferred to District 75 5/13/2008 Closed 5/20/2008	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: 5/20/2008 SERVICE IN PERSON